Illinois Human Services Commission

Meeting Summary

Date & Time: Friday, February 19, 2010; 12 – 2pm

Location: JRTC 2-025

Attending: Co-chairs: Toni Irving, Office of the Governor; Ngoan Le, The Chicago Community Trust

Members of the General Assembly: Sara Feigenholtz; Mattie Hunter; Naomi Jakobsson (by phone); David Leitch (by phone); Rosemary Mulligan (by phone); Carole Pankau (by phone) Dave Syverson (by phone)

State Agency Directors: Damon Arnold, Department of Public Health; Charles Johnson, Department on Aging; Barry Maram, Department of Healthcare and Family Services; Erwin McEwen, Department of Children and Family Services; Michael Randle, Department of Corrections (by phone); Michelle Saddler, Department of Human Services

Commissioners: Sam Balark, AT&T (by phone); Rev. Byron Brazier, Apostolic Church of God; Mary Ellen Caron, Chicago Dept. of Family and Support Services (by phone); Eileen Durkin, Neumann Family Services; Kurt Friedenauer, Department of Juvenile Justice; Pam Heavens, Will-Grundy Center for Independent Living; Gary Huelsmann, Catholic Charities (by phone); Anne Irving, AFSCME Council 31; Marco Jacome, Healthcare Alternatives System; Shawn Jeffers, Little City Foundation (by phone); George Jones, Ada S. McKinley; Valerie Lies, Donors Forum; Soo Ji Min, Illinois Caucus for Adolescent Health; Nancy Ronquillo, Childrens Home and Aid; Dee Ann Ryan, Vermilion County Mental Health (by phone); Kathy Ryg, Voices for Illinois Children; Laura Thrall, United Way Metropolitan Chicago; Ray Vázquez, YMCA; Maria Whelan, Action for Children; David Whittaker, Chicago Area Project

Absent: N/A (this was an optional meeting)

Staff:

Jill Baldwin, Donors Forum; Betsy Bowen, The Chicago Community Trust; Jim Lewis,

The Chicago Community Trust; Rob Paral, Rob Paral and Associates; Ashley Rook,

Office of the Governor

Guests: Jennifer Aring, Senate Republicans (by phone); Melissa Black, Senate Democrats (by

phone); Michele Carmichael, State Board of Education; Brandi Collins, Safer Foundation; Ian Doughty, Department of Healthcare and Family Services; Robert Goerge, Chapin Hall; Shelith Hansbro, Department of Corrections (by phone); Colleen Jones, Metropolitan Family Services, Larry Joseph, Voices for Illinois Children; Jack Kaplan United Way of Metropolitan Chicago; Dave Lowitzki, SEIU; Kate Maehr, Greater

Chicago Food Depository; Kiran Mehta, Department of Healthcare and Family Services; Rashanda Perryman, Ounce of Prevention Fun; Pr. Dan Schwick, Lutheran

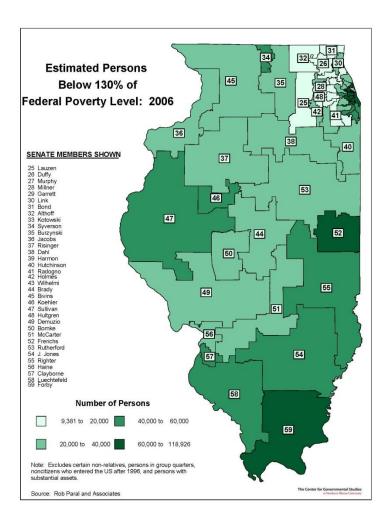
Social Services of Illinois; Angie Sidles Office of the Governor (by phone); Greg Wass, Office of the Governor; Cheryl Whitaker; Chicago Community Trust; Carolyn Williams Meza, Department of Healthcare and Family Services

Next meeting: TBD

This meeting was an addition to the Illinois Human Services Commission (HSC) planned schedule of meetings. It was developed at the request of several commissioners who, at the January meeting, felt that an overview of human services sector would be helpful to the work of the commission.

The co-chairs first welcomed all attendees, and then introduced Rob Paral of Rob Paral and Associates, who provided an overview of state's human services system: its key dimensions and trends. These include the following:

- Over time, the human services system has grown in scope, complexity and types of services offered. This often occurs in response to demographic changes.
- Of late, the pace of change has accelerated. In particular, since 1990, there have been varied and significant expansions of Medicaid eligibility for seniors, children, parents and people with disabilities.
- The human services system is complex at its very foundation, because of the interplay of federal
 and state roles and responsibilities. Some human service programs are funded by a mixture of
 federal and state funds, others are funded by one or the other entity, and others are a mix.
- Looking at the need for human services from a geographic perspective, the following map illustrates that poverty is not a northern or southern Illinois phenomenon.



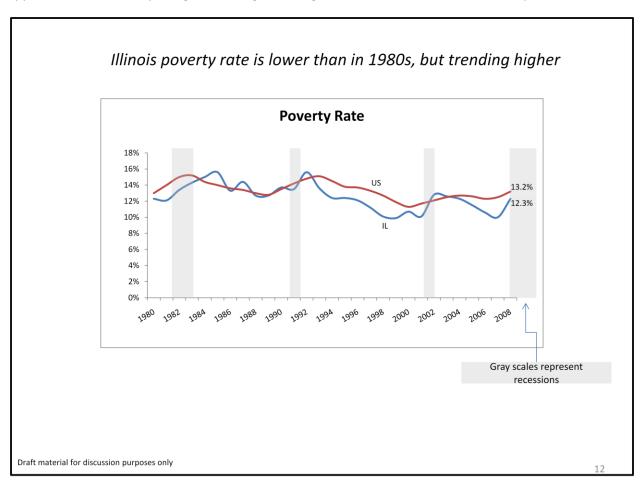
Regarding FY 10 budget information, it was stressed that the eight human service agencies¹ represented on the HSC had very little lead time to supply it once a February meeting was added. The co-chairs expressed gratitude to the agencies for responding to the HSC's request even as they were preoccupied with developing FY 11 budgets. The quick turnaround did not allow time to verify the data, and so the preliminary charts based on them are not included here. (However, verified data will be included in the HSC's first report, an overview of the human services system.) Here are general observations from the presentation – again, with the caveat that the data are still being verified:

 Human services funding in the budgets of these eight state agencies makes up a large portion of the state budget, as much as one-half of it, including federal dollars channeled to Illinois.

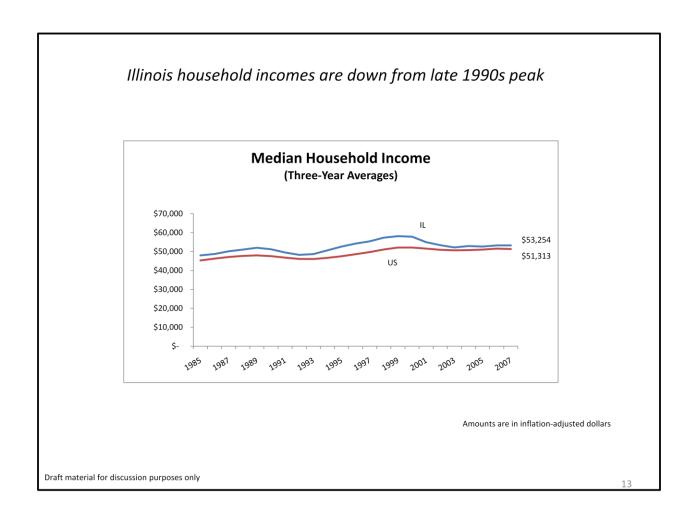
¹ The agencies represented on the HSC and that provided data are: Department on Aging, Department of Children and Family Services, Department of Corrections, Department of Healthcare and Family Services, Department of Human Services, Department of Juvenile Justice, Department of Public Health and the State Board of Education.

- The Department of Healthcare and Family Services, the agency charged with improving the lives of Illinois' families through healthcare coverage and child support enforcement, accounts for as much as one-half of human services spending.
- Of the nearly 600 programs that these eight agencies submitted for analysis, about 380 were determined to be human-services related. The others were for general education, capital, administration, facilities maintenance, transportation, etc.
- Of these approximately 380 human services programs, 16 of them account for about four-fifths of all human services spending.
- Programs that address health, disabilities and the needs of children are the leading human services categories.

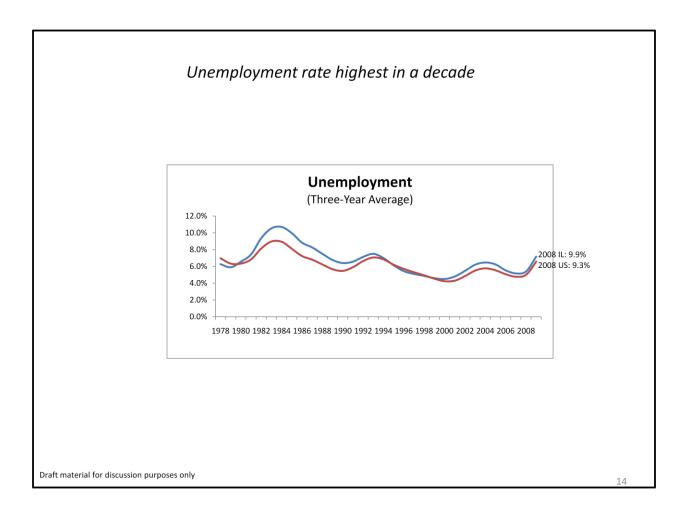
The following charts cover trends that will affect the need for human services in the years ahead. The first reveals many stretches where Illinois has had a lower poverty rate than the US overall, including today. However, it also shows that our state's poverty rate has spiked higher than the nation as a whole in the wake of recessions; a recurring trend that we may soon confront. As the chart illustrates, it appears that Illinois may be again heading in the higher-than-the-US-overall direction, post recession.



The trend data on median household income, below, is adjusted for inflation. Illinois, like much of the Midwest, is in trending downward, which pressures government-funded human services programs in terms of both resources and demand: when incomes are down or flat, there is less tax revenue coming in, and people have less money to spend on what they need.

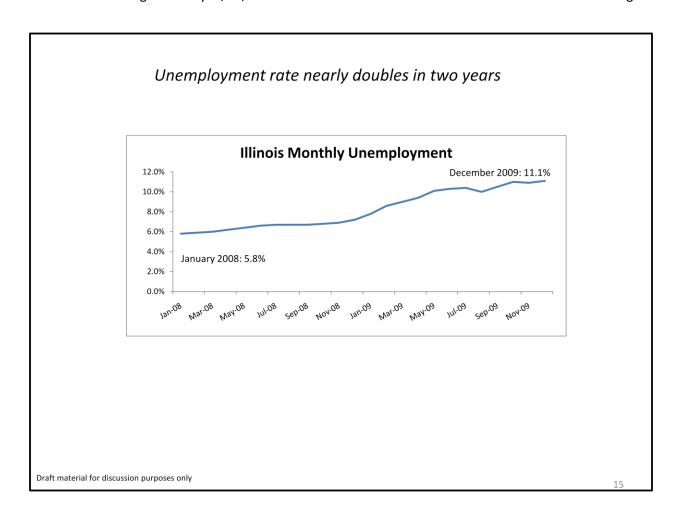


The next table illustrates that Illinois bears a higher level of unemployment than the US overall:



Here several commissioners noted that the actual numbers of the unemployed are higher, because the term "unemployed" only includes those currently receiving benefits and those who proactively check in with a local IDES office after their benefits expire.

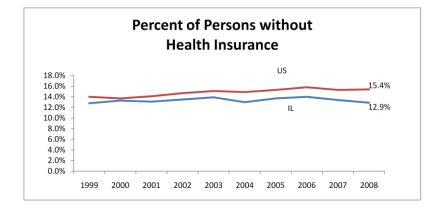
The current recession's effects are seen even more closely in the next table, which charts how the unemployment rate has nearly doubled over the past two years:



The next two tables show that Illinois is doing better than the nation overall, in terms of the numbers of people without health insurance. When broken this down by age (in the second table) it becomes clear that lowering the number of children without health insurance accounts for much of the difference.

As the age breakdown makes clear, we see many more adults without health insurance than children. The higher number of working-age people without health insurance is one indication of how difficult it is for many employers to provide it.

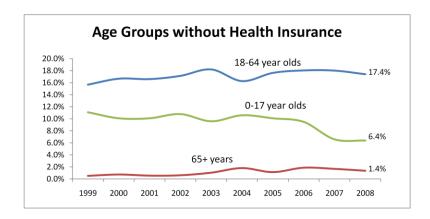
Percent of persons without health insurance declines in recent years



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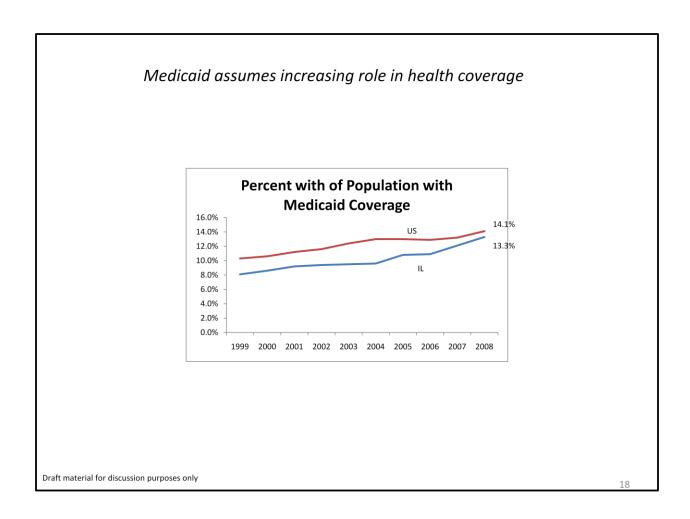
Improvement in health insurance coverage largely due to increased coverage of children



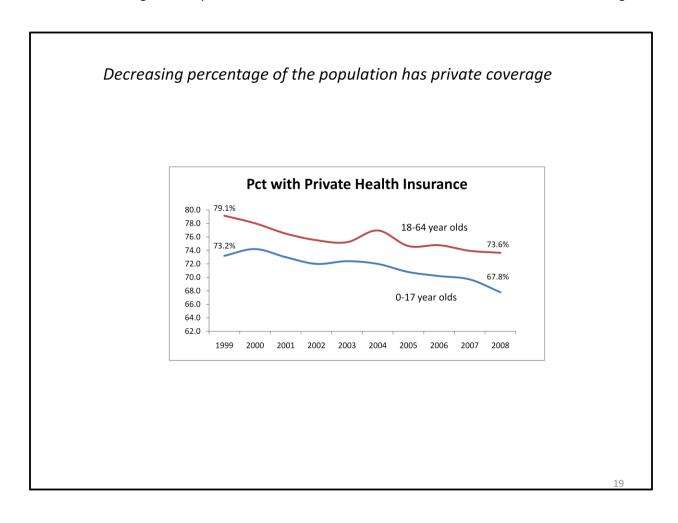
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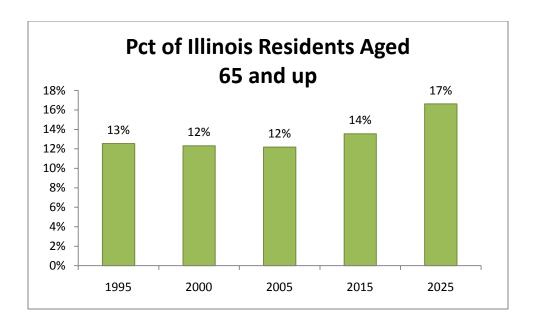
A final set of charts related to healthcare trends shows that, of those with healthcare coverage, the percentage that relies on Medicaid services is on the upswing. Commissioner Arnold clarified the impact of All Kids and FamilyCare on the state's healthcare budget: families pay premiums to the state, similar to what they would do with private care. Therefore, those revenue dollars do not represent additional state dollars for healthcare, but rather families paying in to the system.

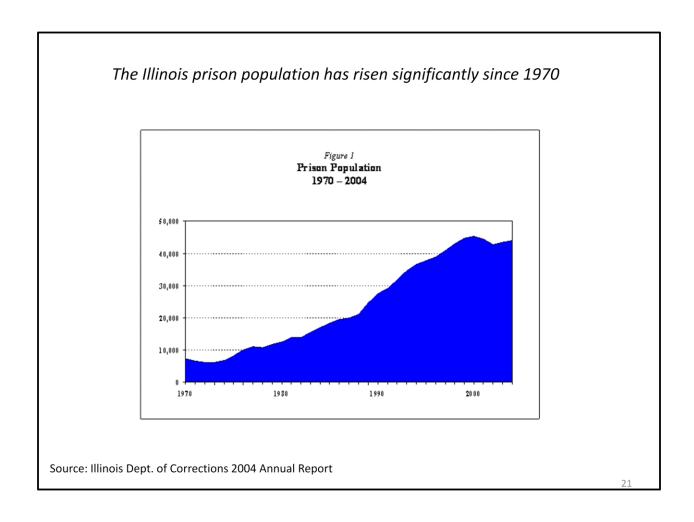


For the next slide, which shows, by age group, the declining number of people who have private insurance, Commissioner Arnold also clarified that these numbers do not measure for or reflect the quality or affordability of private health insurance, for those how have it. Commissioner Maram pointed out that this slide also shows that employers cannot afford to provide insurance to their workers.



The final set of slides chart two demographic trends that greatly affect the need for human services. The first shows how our population is trending older, as the first wave of baby boomers reach retirement age. Their growing need for healthcare and their eligibility for Medicare services that provide it are likely to pressure resources for other types of services and other populations. The second chart shows the dramatic rise in our prison population since the 1970s, which adds another set of demands for reentry services and post-release supports to receiving communities and families.





Query: several commissioners said they would like to see a breakdown of who is incarcerated and for what reason(s). Should this be noted in the meeting summary? Is this w/in our charge and if so, how can we best follow up on this request?

The co-chairs closed the meeting by covering next steps. Commissioner Le described the Technical Support Team she assembled to acquire and analyze data on various human services areas. Ashley Rook of the Governor's office is researching the work of other commissions so that we can draw on their efforts. She, Betsy Bowen with The Chicago Community Trust and Jill Baldwin with the Donor's Forum are also conducting one-on-one interviews with all commissioners to get their input into the work of the commission.

Several commissioners asked whether materials could be distributed earlier. The co-chairs said they would make their best effort to do so; however, they ask that commissioners be aware that, without dedicated staff, the HSC has limited capacity. To date, between-meeting work has relied on staff loaned from other organizations.

Several commissioners asked whether the nongovernment contributions to the human services system can be captured and reported, including philanthropy as well as volunteer hours and other in-kind services. The Donor's Forum is looking into whether it can obtain data. Commissioner Pankau pointed out that local community mental health associations leverage other types funding, including foundations.

Commissioner Saddler and the co-chairs urged other commissioners to post information about resources and data that they have available on the SharePoint site, which serves as a kind of virtual source of administrative support to the HSC. Commissioner Saddler also reminded the group that providers can leverage additional dollars from IDHS for in-kind and third- party contributions. The website link for this program is: http://www.dhs.state.il.us/page.aspx?item=48296. Further information is available from Caronina Grimble: Caronina.Grimble@illinois.gov or 312-793-2665.